



House of Representatives

General Assembly

File No. 102

February Session, 2012

House Bill No. 5387

House of Representatives, March 26, 2012

The Committee on Insurance and Real Estate reported through REP. MEGNA of the 97th Dist., Chairperson of the Committee on the part of the House, that the bill ought to pass.

***AN ACT CONCERNING HEALTH INSURANCE CLAIM FORMS AND
THE DEVELOPMENT OF A UNIFORM TREATMENT AUTHORIZATION
FORM FOR MENTAL HEALTH SERVICES.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsections (a) and (b) of section 38a-477 of the general
2 statutes are repealed and the following is substituted in lieu thereof
3 (*Effective October 1, 2012*):

4 (a) Except where there is an agreement to the contrary between a
5 third-party payer and the health care provider, as defined in section
6 19a-17b, all health care providers shall submit all third-party claims for
7 payment on the current standard Health Care Financing
8 Administration Fifteen Hundred (HCFA1500) health insurance claim
9 form or its successor, or in the case of a hospital or other health care
10 institution, a Health Care Financing Administration UB-92 health
11 insurance claim form or its successor, or in accordance with other
12 forms [which] that may be prescribed by the Insurance Commissioner.
13 With respect to the Health Care Financing Administration Fifteen

14 Hundred health insurance claim form or its successor or other form
 15 prescribed by the commissioner for third-party claims for payment, a
 16 health care provider shall be allowed to use a National Provider
 17 Identifier assigned to such provider by the Centers for Medicare and
 18 Medicaid Services' National Plan and Provider Enumeration System in
 19 lieu of such provider's federal tax identification number.

20 (b) For any claim submitted to an insurer on the current standard
 21 Health Care Financing Administration Fifteen Hundred health
 22 insurance claim form or its successor, if the following information is
 23 completed and received by the insurer, the claim may not be deemed
 24 to be deficient in the information needed for filing a claim for
 25 processing pursuant to subparagraph (B) of subdivision (15) of section
 26 38a-816.

T1	Item Number	Item Description
T2	1a	Insured's identification number
T3	2	Patient's name
T4	3	Patient's birth date and sex
T5	4	Insured's name
T6	10a	Patient's condition - employment
T7	10b	Patient's condition - auto accident
T8	10c	Patient's condition - other accident
T9	11	Insured's policy group number
T10		(if provided on identification card)
T11	11d	Is there another health benefit plan?
T12	17a	Identification number of referring physician
T13		(if required by insurer)
T14	21	Diagnosis
T15	24A	Dates of service
T16	24B	Place of service
T17	24D	Procedures, services or supplies
T18	24E	Diagnosis code
T19	24F	Charges
T20	25	Federal tax identification number
T21		<u>or National Provider Identifier</u>

T22	28	Total charge
T23	31	Signature of physician or supplier with date
T24	33	Physician's, supplier's billing name,
T25		address, zip code & telephone number

27 Sec. 2. (*Effective from passage*) Not later than January 1, 2013, the
 28 Commissioner of Public Health, in consultation with the Insurance
 29 Commissioner, the Commissioner of Mental Health and Addiction
 30 Services, the Attorney General and the Healthcare Advocate, shall
 31 develop a uniform treatment authorization form for mental health
 32 services. Such form shall (1) be used by health care providers and
 33 hospitals in this state to obtain patient authorization and information
 34 for the provision of mental health services, (2) meet, at a minimum,
 35 privacy standards set forth in state and federal privacy laws, including,
 36 but not limited to, the Health Insurance Portability and Accountability
 37 Act of 1996, P.L. 104-191, as amended from time to time, and any
 38 regulations adopted thereunder, and (3) comply with state and federal
 39 mental health parity laws. Not later than January 15, 2013, the
 40 Commissioner of Public Health shall submit any proposed legislation
 41 the Commissioner of Public Health deems necessary to implement the
 42 use of such form to the joint standing committee of the General
 43 Assembly having cognizance of matters relating to public health.

This act shall take effect as follows and shall amend the following sections:

Section 1	<i>October 1, 2012</i>	38a-477(a) and (b)
Sec. 2	<i>from passage</i>	New section

INS *Joint Favorable*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: None

Municipal Impact: None

Explanation

Section 1 of the bill concerns provider identification submitted on health insurance claim forms. There is no fiscal impact to the state as these are private transactions between providers and insurers.

Section 2 requires the development of a uniform treatment authorization form for mental health services by January 1, 2013. There is no fiscal impact to the Department of Public Health for the Commissioner, in consultation with four other agencies, to develop the form.

The Out Years

State Impact: None

Municipal Impact: None

OLR BILL ANALYSIS**HB 5387*****AN ACT CONCERNING HEALTH INSURANCE CLAIM FORMS AND THE DEVELOPMENT OF A UNIFORM TREATMENT AUTHORIZATION FORM FOR MENTAL HEALTH SERVICES.*****SUMMARY:**

This bill allows a health care provider to submit his or her National Provider Identifier (NPI), instead of a federal tax identification number, on the standard Health Care Financing Administration 1500 (HCFA 1500) health insurance claim form. The NPI is assigned by the Centers for Medicare and Medicaid Services' National Plan and Provider Enumeration System. A federal tax identification number can be a provider's Social Security Number.

The bill also requires the public health commissioner, by January 1, 2013, to develop a uniform treatment authorization form for mental health services. She must (1) develop the form in consultation with the insurance commissioner, mental health and addiction services commissioner, attorney general, and healthcare advocate and (2) submit to the Public Health Committee, by January 15, 2013, any necessary proposed legislation to implement the use of the form.

The bill requires health care providers and hospitals to use the uniform authorization form when obtaining patient authorization and information for the provision of mental health services. The form must comply with state and federal mental health parity and privacy laws, including the Health Insurance Portability and Accountability Act.

EFFECTIVE DATE: Upon passage, except for the HCFA 1500 claim form change, which is effective October 1, 2012.

COMMITTEE ACTION

Insurance and Real Estate Committee

Joint Favorable

Yea 18 Nay 1 (03/13/2012)